Effective October 1, 2000												7
CLAIMS AS FILED - PART I SMALL ENTITY (Column 1) (Column 2) TYPE OR												THAN ENTITY
T	OTAL CLAIMS	} 	io					RATE	FEE	7	RATE	FEE
F	OR		NUMBER FILED		NUMBER EXTRA			BASIC F	355.00	OR	BASIC FEE	710.00
T	OTAL CHARGE	ABLE CLAIMS	Eminus 20=		. 0			X\$ 9=		OR	X\$18=	
N	DEPENDENT C	LAIMS	minus 3 =		0			X40=	1-	-	Váa.	
MULTIPLE DEPENDENT CLAIM PRESENT									-	OR		
* If the difference in column 1 is less than zero, enter						column 2		+135=		OR		4.00
CLAIMS AS AMENDED - PART II								TOTAL	·	OR		110
(Column 1) (Column 2) (Column 3)									. ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.70	Minus	.25	>	.0		X\$-9=		OR	X\$18=	
	independent	. 2	Minus			.6	4	X40=		OR.	X80=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					ı	+135=	1	1	+270=		
					ġ.		L	TOTAL		OR	TOTAL	
		(Column 1)		(Colum	nn 2)	(Column 3)	A	ODIT. FE		JOR .	ADDIT. FEE	
AMENOMENT B		CLAIMS REMAINING		HIGH		ST			ADDI-	1		ADDI-
		AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL
	Total	. 20	Minus	· 2	0	= _	I	X\$ 9=		OR	X\$18=	
	Independent	٠ 2	Minus	3	3	a .	ı	X40=		-	X80≃	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAI				CLAIM		ŀ		 	OR	7.00-	
							L	+135=		OR	+270=	
							A	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE	
-	77 - W-1147 - 11 11 11	(Column 1)		(Colum	-	(Column 3)						
١,	19,74	CLAIMS REMAINING AFTER AMENOMENT		HIGHE NUMB PREVIOU PAID F	EA USLY	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**			T	X\$ 9=		OR	X\$18=	1 4 5
	Independent		Minus	***			H					
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM		L	X40=		OR	X80=	
,,	the entering	- 41. I			•••	-	1	+135=	١,	OR	+270=	
. 11	the Highest Nun	nn 1 is less than the ober Previously Pal	d For IN THIS	SPACE IS	ess than	20, enter "20,"	ΔD	TOTAL DIT. FEE		OR ,	TOTAL	
••!	the "Highest Nun	nber Previously Pai per Previously Paid	d For IN THIS	SPACE is	less than	3 enter "3."			propriate box	, ,	1001T, FEE L 1900 1.	-

Application or Docket Number